Figure. Example of a two-page order form explicitly stating patient selection criteria for the use of drotrecogin alfa. Includes criteria for SIRS, organ dysfunction, APACHE II scoring, as well as absolute and relative contraindications. Reprinted with permission (R0438). *From Wong-Beringer et al. Am J Health Syst Pharm. 2003;60:1345-52.*

ALLERGIES:		**HT:**	**WT <136KG:**	**AGE >17:**
DATE:	**TIME:**	**Cost of Therapy: $100/kg of patient weight $**		

PATIENT HAS KNOWN OR SUSPECTED INFECTION (ONE OF THE FOLLOWING)

- ☐ WBCs in a normally sterile body fluid
- ☐ Perforated viscus
- ☐ CXR evidence of pneumonia **with** purulent sputum product
- ☐ A syndrome with a high risk of associated infection

State the site of suspected or known infection: _____

PATIENT HAS THREE OF FOUR SYSTEMIC INFLAMMATORY RESPONSE SYNDROME (SIRS) CRITERIA

- ☐ Core body temp of ≤36 °C (96.8 °F) **or** ≥38 °C (100.4 °F)
- ☐ Heart rate ≥90 bpm **except** in patients with a condition known to ↑ heart rate **or** on treatments which may prevent tachycardia
- ☐ Respiratory rate ≥20 breaths/min **or** a $PaCo_2$ of ≤32 mmHg **or** on mechanical ventilation
- ☐ WBC count of ≥12,000 **or** ≤4,000 **or** >10% bands on differential

EVIDENCE OF AT LEAST TWO OF THE FOLLOWING SIGNS OF ORGAN DYSFUNCTION PRESENT FOR LESS THAN 24 HRS

- ☐ Cardiovascular: SBP ≤90 **or** MAP ≤70 for 1 hour **despite** fluid resuscitation, adequate volume status **or** use of vasopressors
- ☐ Renal: UOP <0.5 ml/kg/hr for 1 hour **despite** adequate fluid resuscitation
- ☐ Respiratory: PaO2/FiO2 ratio ≤250
- ☐ Hematologic: Platelet count of <80,000 **or** a 50% decrease in platelets in the previous 3 days
- ☐ Unexplained Metabolic Acidosis: pH ≤ 7.30 **or** a base deficit of ≥5 **with** a plasma lactate level >1.5X the upper limit of normal

APACHE II SCORE MUST BE AT LEAST 25 (SCORING WORKSHEET ATTACHED): **Calculated score** _____

CODE STATUS: ☐ **FULL CODE** ☐ **NO ADVANCE DIRECTIVE TO WITHHOLD LIFE-SUSTAINING TREATMENT**

EXCLUSION/CONTRAINDICATIONS:

Yes	No	
☐	☐	Active internal bleed or Platelet count <30,000/mm^3 or INR > 3
☐	☐	Recent hemorrhagic stroke (within 3 months)
☐	☐	Recent intracranial or intraspinal surgery or severe head trauma requiring hospitalization (within 2 months)
☐	☐	Trauma patients with increased risk of life-threatening bleeding
☐	☐	Patients with epidural catheters
☐	☐	Patients with intracranial neoplasm or mass lesion
☐	☐	Patients with known hypersensitivity to drotrecogin alfa (activated) or any component of the product
☐	☐	Patients with chronic renal failure requiring hemodialysis or peritoneal dialysis
☐	☐	Known/suspected portosystemic hypertension, chronic jaundice, cirrhosis, or chronic ascites
☐	☐	HIV infection with last CD4 count < 50 or history of bone, liver, lung, pancreas, or small-bowel transplantation

*Due to the anticoagulant properties of drotrecogin alfa (activated), caution should be taken when given concomitantly with other drugs with anticoagulant properties and/or if the PTT or PT is elevated.

RELATIVE CONTRAINDICATIONS:
PLEASE JUSTIFY BENEFIT VS RISK FOR EACH BOX CHECKED IN THE COMMENT SECTION BELOW

Patient had a known hypercoagulable condition:

- ☐ APC resistance
- ☐ Hereditary protein C, protein S, or antithrombin III deficiency
- ☐ Anticardiolipin or antiphospholipid antibody
- ☐ Lupus anticoagulant
- ☐ Homocysteinemia
- ☐ Recent or highly suspected pulmonary embolism or deep vein thrombosis (within 3 months)

Patient had a condition that increased the risk of bleeding:

- ☐ Gastrointestinal bleeding (within 6 weeks)
- ☐ Surgery with general or spinal anesthesia within 12 hours
- ☐ Potential need for surgery during the infusion
- ☐ Active postoperative bleeding
- ☐ Severe head trauma
- ☐ Intracranial surgery or stroke within 3 months
- ☐ Arteriovenous malformation, cerebral aneurysm, or mass lesion in the central nervous system
- ☐ Congenital bleeding diatheses
- ☐ Trauma with increased risk of bleeding (injury to a blood vessel or to a highly vascular organ)

Patient was receiving any of the following drugs or regimens:

- ☐ Therapeutic unfractionated heparin within 8 hours before the drug infusion (>15,000 units/day)
- ☐ Therapeutic low molecular weight heparin within 12 hours
- ☐ Warfarin within 7 days and if PT exceeded the upper limit of normal
- ☐ Thrombolytic therapy (within 3 days) not including catheter clearance doses
- ☐ Glycoprotein IIb/IIIa inhibitors (within 7 days)
- ☐ Aspirin > 650 mg per day or other platelet inhibitors (within 7 days)
- ☐ Ischemic stroke (within 3 months)

- ☐ Any other condition in which bleeding constitutes a significant hazard
- ☐ Patients who are pregnant or breastfeeding

COMMENTS:

_____

_____

_____

PATIENT MEETS ALL THE ABOVE CRITERIA WITHOUT ANY EXCLUSION/CONTRAINDICATIONS FOR TREATMENT WITH DROTRECOGIN ALFA. RELATIVE CONTRAINDICATIONS ARE JUSTIFIED

- ☐ Start Drotrecogin Alfa (activated) 24 mcg/kg/hr for 96 hours.

PHYSICIAN SIGNATURES REQUIRED:

_____

PULMONOLOGIST/CRITICAL CARE SPECIALIST **INFECTIOUS DISEASES SPECIALIST** **DATE/TIME**

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